

# NON USE CERTIFICATION MONITORING REPORT

## LOCAL LIMITS

**NAME:** SUNBRITE DYE COMPANY, INC.

**MAILING ADDRESS:** PO BOX 1076, PASSAIC NJ 07055

**FACILITY LOCATION:** 35 8th STREET, PASSAIC, NJ 07055

**CATEGORY & SUBPART** NA

**PERMIT #:** 26220002

**OUTLET #:** 1

**CONTACT OFFICIAL:** ANTONIO MONTEIRO

**TELEPHONE #:** 777-9830

I have been authorized to certify non-use for the following heavy metals:

Arsenic	<input type="checkbox"/>	Lead	<input checked="" type="checkbox"/>	Zinc	<input type="checkbox"/>	SAMPLE DATE		
Cadmium	<input checked="" type="checkbox"/>	Mercury	<input checked="" type="checkbox"/>			MONTH	DAY	YEAR
Chromium	<input type="checkbox"/>	Molybdenum	<input type="checkbox"/>			SEPTEMBER	4	2008
Copper	<input type="checkbox"/>	Nickel	<input checked="" type="checkbox"/>					

PARAMETER		CONCENTRATION			SAMPLE TYPE
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	COMP/GRAB
Mercury	Sample Measurement	<0.0005	NO	MG/L	COMP
	Threshold Value	0.001		MG/L	
Nickel	Sample Measurement	0.00481	NO	MG/L	COMP
	Threshold Value	0.02		MG/L	
Cadmium	Sample Measurement	<0.001	NO	MG/L	COMP
	Threshold Value	0.005		MG/L	
Lead	Sample Measurement	0.00657	NO	MG/L	COMP
	Threshold Value	0.029		MG/L	
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				

PVSC Form MR-3 10/96

- (1) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have met the non-use certification criteria for the following heavy metals:

As <input type="checkbox"/>	Cr <input type="checkbox"/>	Pb <input checked="" type="checkbox"/>	Mo <input type="checkbox"/>	Zn <input type="checkbox"/>
Cd <input checked="" type="checkbox"/>	Cu <input type="checkbox"/>	Hg <input checked="" type="checkbox"/>	Ni <input checked="" type="checkbox"/>	

Therefore, I am required to monitor for these heavy metals only in March and September.

- (2) (a) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have not yet met the non-use certification criteria for the following heavy metals:

		*		*			*
Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	Copper	<input type="checkbox"/>	<input type="checkbox"/>	Molybdenum	<input type="checkbox"/>
Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	Lead	<input type="checkbox"/>	<input type="checkbox"/>	Nickel	<input type="checkbox"/>
Chromium	<input type="checkbox"/>	<input type="checkbox"/>	Mercury	<input type="checkbox"/>	<input type="checkbox"/>	Zinc	<input type="checkbox"/>

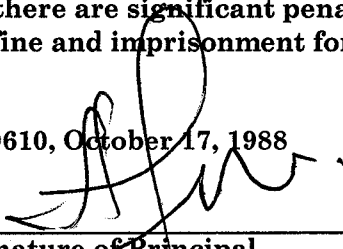
- (b) \* Means the number of additional monthly samples needed to reach 3 months in succession when the value is equal to or below the Threshold Value. I understand that I must automatically monitor for the heavy metals identified in (2) (a) above each month until the analytical results for three (3) months in succession are at or below the threshold value for that heavy metal. This will not affect my responsibility to monitor in March and September as required by Section B-103.

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6 (a)(2)(ii) revised by 53 FR 40610, October 17, 1988

10/16/2008

Date

  
\_\_\_\_\_  
Signature of Principal  
Executive or Authorized Agent

\_\_\_\_\_  
ANTONIO MONTEIRO  
\_\_\_\_\_  
MAINTENANCE MANAGER  
\_\_\_\_\_  
Type Name and Title



## ANALYTICAL DATA REPORT

for  
**SunBrite Dye Co., Inc.**  
 35 8th St.  
 Passaic, NJ 07055

**Project Name: PVSC MONITORING**  
**Lab Case Number: E08-10190**

MDL = METHOD DETECTION LIMIT

&lt;= LESS THAN THE MDL

## Metals

Lab ID: 10190-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 9/4/2008

Time Sampled: 10:30

Date Analyzed: 9/11/08

Parameter	Result	Q	MDL
Cadmium	< 0.001	/	0.001
Copper	0.012	/	0.008
Lead	0.00657	/	0.002
Mercury	< 0.0005	/	0.0005
Nickel	0.00481	/	0.004
Zinc	0.468	/	0.008

## General Analytical

Lab ID: 10190-001

Client ID: 01

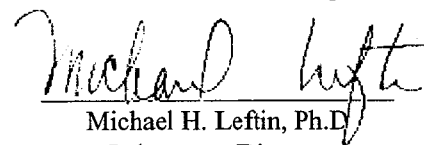
Percent Moisture: 100

Date Sampled: 9/4/2008

Time Sampled: 10:30

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	350	2.00	Aqueous-mg/L	9/5/2008 7:50
Total Suspended Solids	124	25.0	Aqueous-mg/L	9/10/2008 9:00

These data have been reviewed and accepted by:

  
 Michael H. Leftin, Ph.D.  
 Laboratory Director

273 Franklin Road  
 Randolph, NJ 07869  
 Phone: 973 361 4252  
 Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Pennsylvania (68-00773) and in the Department of Navy IR QA Program

